								Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2001									10/0/6/055					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			ان				F	ATE	FEE		RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA		BA:	SIC FEE	370.00	OR	BASIC FEE	740.00		
TOTAL CHARGEABLE CLAIMS			\ \ \ minus 20=		·Φ		×	\$ 9=		OR	X\$18=			
INDEPENDENT CLAIMS			Minus 3 =				5	(42=		OR	X84=	84		
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				1.	140=		OR	+280=			
*If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	824		
5/19/05 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								WALL	ENTITY	OR	OTHER SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	100	HIGH NUM PREVI	HEST HBER OUSLY FOR	PRESENT EXTRA	F	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	. 18	Minus	* 1	V)	= 4/2	×	\$ 9=		OR	X\$18=			
	Independent	• 4	Minus	***	1	-0	\[\rightarrow\)	.42=		OR	X84=			
٢	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	140=		OR	+280=			
TOTAL										00	TOTAL	7		
(Column 1) (Column 2) (Column 3)								IT. FEE	L		ADDIT FEE			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUM PREVI	HEST MBER HOUSLY FOR	PRESENT EXTRA	A	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus	**		=	X	\$ 9=		OR	X\$18=			
	Independent		Minus	***	T. CL A 19.4	<u> </u>		(42=		OR	X84=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							140=		OR	+280=			
							ADO	TOTAL IT. FEE		OR	TOTAL ADDIT. FEE			
	(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	MBER IOUSLY FOR	PRESENT EXTRA	F	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus	**		=	×	\$ 9=		OR	X\$18=			
	Independent	•	Minus	***	= = T C! A!M		5	(42=		OR	X84=			
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +							140=		OR	+280=			
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	TOTAL			
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														
	The "Highest Nu	mper Previously Pr	OLESTOI ) TO TEME	i indepen	ideni) is u	ic nightest fluidibe	. 100110	.,. u.e a <sub>4</sub>						

FORM PTO-875 (Rev. 8/01)

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